

# CLAIMS ONLY

SERIAL NO. **10 023 049** FILING DATE  
 APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.							TOTAL IND.	14					
TOTAL DEP.							TOTAL DEP.	50					
TOTAL CLAIMS							TOTAL CLAIMS	64					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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